PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

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Polication or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY									
TOTAL CLAIMS		US.					RATE	FEE		RATE	FEE							
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00						
TOTAL CHARGEABLE CLAIMS			US minus 20=		. 29			X\$ 9=		OR	X\$18=	(2)						
INDEPENDENT CLAIMS			3 minus 3 =		4			X40=		OR	X80=							
MULTIPLE DEPENDENT CLAIM PRESENT					,			+135=		OR	+270=							
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2		TOTAL		OR	TOTAL	1232						
CLAIMS AS AMENDED - PART II									<u> </u>	<u> </u>	OTHER							
		(Column 1)	(Column 2) (Column 3)		51 r	SMALL	ENTITY	OR	SWALL	ENTITY								
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
	Total	*	Minus	**	<u> </u>	=		X\$ 9=		OR	X\$18=							
	Independent	*	Minus	***		=		X40=		OR	X80=							
		NTATION OF MI	JLTIPLE DEI	PENDEN	CLAIM			+135=		OR	+270=							
n de la composition de deservación de la composition de la composition de la composition de la composition de Composition de la composition de la co							TOTAL		١	TOTAL	GOYOGH GG GG							
								ADDIT. FEE	L	OR	ADDIT. FEE							
		(Column 1)		(Colu		(Column 3)			ADDI	1		LADOL						
AMENDWENT B		REMAINING AFTER AMENDMENT		PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
POME	Total	*	Minus	**	· •	=		X\$ 9=		OR	X\$18=							
MEN	Independent	*	Minus	***		=		X40=		OR	X80=							
8	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							** ***	,		198. 91.							
								+135=		OŖ	+270=							
							•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE							
		(Column 1)			mn 2)_	(Column 3))											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
	Total.	*	Minus	**		=		X\$ 9=		OR	X\$18=							
	Independent	*	Minus	***		=		X40=		OR	X80=							
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								3									
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=							
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE																		
	The "Highest Nun	nber Previously Pa	id For" (Total o	r Independ	lent) is the	highest number	er fou	""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										